

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	METHOD OF FILLING A MOLD WITH AN ORGANIC MATERIAL IN THE LIQUID STATE TO MOLD AN OPTICAL COMPONENT, AND MOLDING METHOD INCLUDING SAID FILLING METHOD
Attorney Docket Number::	0579-1033
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	5
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: MARC
Middle Name::
Family Name:: HUARD
City of Residence:: ALFORTVILLE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 12, SQUARE SAINT-PIERRE

City of Mailing Address:: ALFORTVILLE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 94140

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: GRACIO
Middle Name::
Family Name:: DA SILVA
City of Residence:: PONTAULT-COMBAULT
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 87, RUE DES PRES SAINT MARTIN

City of Mailing Address:: PONTAULT-COMBAULT
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 77340

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: DANIEL
Middle Name::
Family Name:: DARMES
City of Residence:: PONTAULT-COMBAULT
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 7, RUE DES LONGS PRES

City of Mailing Address:: PONTAULT-COMBAULT
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 77340

Correspondence Information

Correspondence Customer 000466
Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	0300802	1/24/03	Yes

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::